

FAMILY SUPPORT SERVICES FOR ADDICTION ACT OF 2021

Mr. PALLONE. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 433) to establish a grant program for family community organizations that provide support for individuals struggling with substance use disorder and their families.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 433

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Family Support Services for Addiction Act of 2021”.

SEC. 2. FAMILY SUPPORT SERVICES FOR INDIVIDUALS STRUGGLING WITH SUBSTANCE USE DISORDER.

Part D of title V of the Public Health Service Act (42 U.S.C. 290dd et seq.) is amended by adding at the end the following:

“SEC. 553. FAMILY SUPPORT SERVICES FOR INDIVIDUALS STRUGGLING WITH SUBSTANCE USE DISORDER.

“(a) DEFINITIONS.—In this section—

“(1) the term ‘family community organization’ means an independent nonprofit organization that—

“(A) mobilizes resources within and outside of the community of families with individuals living with addiction, to provide a support network, education, and evidence-informed tools for families and loved ones of individuals struggling with substance use disorders; and

“(B) is governed by experts in the field of addiction, which may include—

“(i) experts in evidence-informed interventions for family members;

“(ii) experts in the impact of addiction on family systems;

“(iii) families who have experience with substance use disorders and addiction; and

“(iv) other experts in the field of addiction; and

“(2) the term ‘family support services’ means resources or programs that support families that include an individual with substance use disorder.

“(b) GRANTS AUTHORIZED.—The Secretary shall award grants to family community organizations to enable such organizations to develop, expand, and enhance evidence-informed family support services.

“(c) FEDERAL SHARE.—The Federal share of the costs of a program funded by a grant under this section may not exceed 85 percent.

“(d) USE OF FUNDS.—Grants awarded under subsection (b)—

“(1) shall be used to develop, expand, and enhance community and statewide evidence-informed family support services; and

“(2) may be used to—

“(A) build connections between family support networks, including providing technical assistance between family community organizations and peer support networks, and with other family support services, focused on enhancing knowledge of evidence-informed interventions for family members and loved ones of individuals living with substance use disorders and reducing harm by educating service providers on current evidence regarding addiction and the family, including—

“(i) behavioral health providers, including such providers focused specifically on family and couples therapy in the context of addiction;

“(ii) primary care providers;

“(iii) providers of foster care services or support services for grandparents, guardians,

and other extended family impacted by addiction; and

“(iv) other family support services that connect to community resources for individuals with substance use disorders, including non-clinical community services;

“(B) reduce stigma associated with the family of individuals with substance use disorders by improving knowledge about addiction and its treatment, providing compassionate support, and dispelling myths that perpetuate such stigma;

“(C) conduct outreach on issues relating to substance use disorders and family support, which may include education, training, and resources with respect to—

“(i) building a resilience- and strengths-based approach to prevention of, and living with, addiction in the family;

“(ii) identifying the signs of substance use disorder;

“(iii) adopting an approach that minimizes harm to all family members; and

“(iv) families of individuals with a substance use disorder, including with respect to—

“(I) navigating the treatment and recovery systems;

“(II) paying for addiction treatment;

“(III) education about substance use disorder; and

“(IV) avoiding predatory treatment programs; and

“(D) connect families to evidence-informed peer support programs.

“(e) DATA REPORTING AND PROGRAM OVERSIGHT.—With respect to a grant awarded under subsection (a), not later than 90 days after the end of the first year of the grant period, and annually thereafter for the duration of the grant period, the entity shall submit data, as appropriate and to the extent practicable, to the Secretary regarding—

“(1) the programs and activities funded by the grant;

“(2) health outcomes of the population of individuals with a substance use disorder who received services through programs supported by the grant, as evaluated by an independent program evaluator through the use of outcomes measures, as determined by the Secretary; and

“(3) any other information that the secretary may require for the purpose of ensuring that the grant recipient is complying with all the requirements of the grant.

“(f) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$5,000,000 for each of fiscal years 2022 through 2026.”

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New Jersey (Mr. PALLONE) and the gentleman from Kentucky (Mr. GUTHRIE) each will control 20 minutes.

The Chair recognizes the gentleman from New Jersey.

GENERAL LEAVE

Mr. PALLONE. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 433.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

Mr. PALLONE. Madam Speaker, I yield myself such time as I may consume.

I rise today in support of H.R. 433, the Family Support Services for Addiction Act of 2021.

Addiction and substance use disorder are complex, yet diagnosable, treatable diseases. Families can play a significant role in helping an individual find treatment. Yet, there isn't a one-size-fits-all approach to making sure that loved ones receive the care they need and deserve. This, of course, can be a challenge to more than just the individual; it is a challenge to families as well.

Madam Speaker, families across the United States are doing all they can to seek care for those they love. In fact, data from the Substance Abuse and Mental Health Services Administration reminds us that nearly 20 million Americans live with a substance use disorder. Unfortunately, only a fraction of those Americans receives treatment.

H.R. 433, the Family Support Services for Addiction Act, builds upon congressional efforts, such as the Comprehensive Addiction and Recovery Act, the 21st Century Cures Act, and the SUPPORT for Patients and Communities Act, to help close the treatment gap and get Americans on the road to recovery.

Part of paving a smooth road to recovery is providing evidence-based guidance for families and connecting them with other community support systems, which can dramatically influence an individual's trajectory. That is exactly what this bill sets out to do.

The bill would authorize the Secretary of Health and Human Services to award grants to family community organizations that would work to develop, expand, and enhance evidence-based family support services. These family community organizations would be able to use these grants to reduce stigma around substance use disorder and build connections between families and providers, and foster care services and other peer support services.

I commend the lead sponsors of this legislation, Representatives TRONE and MEUSER, and their staff, for advocating for additional support for families.

I urge my colleagues to support this legislation. I hope the Senate will act on it swiftly.

Madam Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 433, the Family Support Services for Addiction Act of 2021, which was introduced by Representatives TRONE and MEUSER.

This legislation would establish a grant program for family community organizations that provide evidence-informed and family-based approaches to substance use and addiction management.

Family-based approaches have a record of success in substance use disorder recovery when compared with individual approaches, as they address several psychosocial dimensions of addiction and strengthen support networks for affected individuals.

This legislation would support family community organizations committed to pursuing evidence-driven interventions for substance use disorder, reducing the stigma of addiction and strengthening both families and communities through recovery.

I would like to thank Representatives TRONE and MEUSER for the hard work that they have done to put together and to bring this important bill to the floor.

Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield such time as he may consume to the gentleman from Maryland (Mr. TRONE), the author of this bill.

Mr. TRONE. Madam Speaker, I rise today to urge a “yes” vote on H.R. 433, the Family Support Services and Addiction Services Act.

I introduced this bill with my friend and fellow businessman, DAN MEUSER, in order to show our support for the millions of families that are struggling to help their loved ones suffering from addiction.

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In 2016, my nephew Ian lost his life to an overdose after years of struggling with addiction. But he didn’t fight this battle alone. My wife and I were with him every step of the way, working to support his recovery efforts. Getting him the help he needed was hard for us to do, even with the resources we had at our disposal.

Our story is not unique. For most families, it is nearly impossible to navigate our behavioral healthcare system, and COVID-19 has made it even harder.

While our country faced an addiction crisis prior to COVID-19, the pandemic has made this crisis a five-alarm fire. Last year, more Americans died from drug overdoses than ever before, nearly 90,000 Americans. That is a 29 percent increase in just one year. American families need help, and they need it now.

This bipartisan bill provides the funding for nonprofits working with families struggling with addiction. The bill will provide grants to reach more families, create a more tailored approach, and save lives.

I want to thank Congressman MEUSER for his support and partnership. He has been an absolute champion on this issue.

I also want to thank Chairman PALLONE, Chairwoman ESHOO, and Ranking Member RODGERS for their laser-like focus on this issue.

Madam Speaker, I urge a “yes” vote.

Mr. GUTHRIE. Madam Speaker, I yield 2 minutes to the gentleman from Pennsylvania (Mr. MEUSER).

Mr. MEUSER. Madam Speaker, I thank the gentleman from Kentucky, my good friend, Representative GUTHRIE; and my good friend from Maryland, DAVID TRONE, for their work on this bill.

Madam Speaker, the plight of addiction continues to affect communities

across the country and in our great Commonwealth of Pennsylvania. Substance use disorder, like any disease, doesn’t just affect the individual. Their family, spouse, children, and friends also suffer alongside them, hoping for recovery. The critical support system they comprise is a potent tool in combatting addiction and an effective partner we should aim to empower.

That is why this bill, the Family Support Services for Addiction Act, is so essential and why I am truly very proud to be working with my good friend, Representative DAVID TRONE, to see it become law. His commitment to this cause is impressive and honorable.

Our bill provides grants for community organizations, providing critical support to families trying to navigate the complex insurance coverage and treatment options.

Too often, this system overwhelms concerned families looking for the best option for their loved one. By passing this bill, we ensure more families will be connected to a lifesaving treatment option tailored to their needs.

Unfortunately, Madam Speaker, this crisis has only become more acute during the pandemic. According to the CDC, 81,000 drug overdose deaths occurred between May 2019 and May 2020, the highest number recorded in a 12-month period. To combat this epidemic of drug use, we must use every tool we have; and the network of support that families provide is an essential tool to overcoming addiction and restoring our communities.

I, again, want to thank Representative TRONE for his work on this bill, on this very important issue; and the committee leaders for moving this much-needed measure to the floor today.

Madam Speaker, I urge a “yes” vote.

Mr. PALLONE. Madam Speaker, I have no further speakers, I am prepared to close, and I reserve the balance of my time.

Mr. GUTHRIE. Madam Speaker, I yield myself such time as I may consume for the purpose of closing.

Madam Speaker, I really appreciate both the leaders of this bill and the entire House, as we have worked hard together in a bipartisan way over the years for the opioid abuse and other types of abuse and recovery efforts. This is an important bill and an additional step in that direction. We are fighting it, but we still have to continue the fight. This is an important bill. I support it, and I urge my colleagues to support it as well.

Madam Speaker, I yield back the balance of my time.

Mr. PALLONE. Madam Speaker, I yield myself the balance of my time for the purpose of closing.

Madam Speaker, I am sure we will notice as we go through the suspension calendar today that we have a number of bills that deal with addiction and behavioral health issues. This is Mental Health Month that we are observing today, and this is one of the bills that is a very important part of this group.

Madam Speaker, I urge support on a bipartisan basis, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New Jersey (Mr. PALLONE) that the House suspend the rules and pass the bill, H.R. 433.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. ROY. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this motion are postponed.

PURSUING EQUITY IN MENTAL HEALTH ACT

Mr. PALLONE. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 1475) to address mental health issues for youth, particularly youth of color, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1475

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Pursuing Equity in Mental Health Act”.

SEC. 2. TABLE OF CONTENTS.

The table of contents for this Act is as follows:

Sec. 1. Short title.

Sec. 2. Table of contents.

TITLE I—HEALTH EQUITY AND ACCOUNTABILITY

Sec. 101. Integrated Health Care Demonstration Program.

Sec. 102. Addressing racial and ethnic minority mental health disparities research gaps.

Sec. 103. Health professions competencies to address racial and ethnic minority mental health disparities.

Sec. 104. Racial and ethnic minority behavioral and mental health outreach and education strategy.

Sec. 105. Additional funds for National Institutes of Health.

Sec. 106. Additional funds for National Institute on Minority Health and Health Disparities.

TITLE II—OTHER PROVISIONS

Sec. 201. Reauthorization of Minority Fellowship Program.

Sec. 202. Study on the Effects of Smartphone and Social Media Use on Adolescents.

Sec. 203. Technical correction.

TITLE I—HEALTH EQUITY AND ACCOUNTABILITY

SEC. 101. INTEGRATED HEALTH CARE DEMONSTRATION PROGRAM.

Part D of title V of the Public Health Service Act (42 U.S.C. 290dd et seq.) is amended by inserting after section 553 of such Act (as redesignated and moved by section 203 of this Act) the following: